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Legislative  
Assembly  
of Ontario



Assemblée  
législative  
de l'Ontario



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## Official Report of Debates (Hansard)

A-24

## Journal des débats (Hansard)

A-24

Standing Committee on  
Government Agencies

Intended appointments

Comité permanent des  
organismes gouvernementaux

Nominations prévues

2<sup>nd</sup> Session  
41<sup>st</sup> Parliament  
Tuesday 12 September 2017

2<sup>e</sup> session  
41<sup>e</sup> législature  
Mardi 12 septembre 2017

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Chair: Cristina Martins  
Clerk: Sylwia Przedziecki

Présidente : Cristina Martins  
Greffière : Sylwia Przedziecki



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## LEGISLATIVE ASSEMBLY OF ONTARIO

STANDING COMMITTEE ON  
GOVERNMENT AGENCIES

Tuesday 12 September 2017

## ASSEMBLÉE LÉGISLATIVE DE L'ONTARIO

COMITÉ PERMANENT DES  
ORGANISMES GOUVERNEMENTAUX

Mardi 12 septembre 2017

*The committee met at 0901 in committee room 2.*

## SUBCOMMITTEE REPORTS

**The Chair (Mrs. Cristina Martins):** Good morning, everyone. Welcome back to government agencies. I hope everyone had a nice time in their constituencies.

Before we begin our intended appointments review, our first order of business is to consider two subcommittee reports.

The subcommittee report for Thursday, August 24, 2017: Would someone please move adoption of the report? Mr. Pettapiece.

**Mr. Randy Pettapiece:** I move adoption of the subcommittee report on intended appointments dated Thursday, August 24, 2017.

**The Chair (Mrs. Cristina Martins):** Any discussion? All in favour? Opposed? The motion is carried.

The second report is the subcommittee report dated Thursday, September 7, 2017. Would someone please move adoption of the report? Mr. Pettapiece.

**Mr. Randy Pettapiece:** I move adoption of the subcommittee report on intended appointments dated Thursday, September 7, 2017.

**The Chair (Mrs. Cristina Martins):** Any discussion? All in favour? Opposed? The motion is carried.

Thank you very much, Mr. Pettapiece.

## INTENDED APPOINTMENTS

## MR. PAUL MACE

Review of intended appointment, selected by third party: Paul Mace, intended appointee as member, Niagara Grant Review Team.

**The Chair (Mrs. Cristina Martins):** We will now move to the appointments review. We have two intended appointments to hear from today. We will consider the concurrences following the interviews.

Our first intended appointee today is Paul Mace, nominated as member, Niagara Grant Review Team.

Please come forward, Mr. Mace, and take a seat at the table. Thank you for being here today. You may begin with a brief statement, if you wish. Members of each party will then have 10 minutes to ask you questions. Any time used for your statement will be deducted from the government's time for questions. When we do get to

that point during the interview, the questioning will begin with the official opposition.

Mr. Mace, welcome. You have up to 10 minutes.

**Mr. Paul Mace:** Thank you, Madam Chair. Welcome, the members of the committee.

I'll just give you a brief background. I've had a 40-year working career. In 2013, I relocated from Oakville, Ontario to Niagara-on-the-Lake. Officially, I have a title, which is business development manager for Latitude Properties. Latitude Properties is a family business run by my son. I'm happy to say they've continued that as an unpaid position. So I'm enjoying retirement, for the most part, in Niagara-on-the-Lake.

Throughout my 40 years, no matter what I've been doing, I've always had a component of our business life or our personal life in the volunteer sector. So I made an application to sit on a volunteer committee for—and we had three choices: Accessibility Ontario, Ontario Trillium Foundation and the St. Lawrence Parks Commission. The first opportunity that came forward was this position at the Ontario Trillium Foundation.

I'm very happy to be considered as a volunteer member. My involvement in business has always tried to tie in a component, if it wasn't present—to bring in support for charitable organizations and not-for-profits.

In my business career, I'd say I'm an extremely great generalist. I've had exposure to just about every opportunity, from running your own family business to running large trusts to working with organizations that had extremely regimented protocols and trying to change that. That experience was when I was involved with the Mercedes-Benz corporation. They were not flexible. I introduced some flexibility. It was a challenge, quite frankly, but it was quite interesting. So on my business side, honestly, I've experienced a lot of interesting challenges and opportunities.

On the fundraising side and the volunteer side, I chaired a non-profit child care centre in Oakville for 10 years. I quickly learned that one of the challenges facing volunteer organizations is that you have a very strict budget and it's very hard to keep to it. Over the 10 years that I was the chair, we had a tremendous success not only in keeping to our budget, but we were running the largest child care centre in Halton. It was 195 children.

The other thing that we created in that environment which we were very proud of is—as I get older, it's a story every time. My daughter is 27 now. She went to

that child care centre when she was an infant. She went back to work there when she was in university, and 70% of the staff were still there. Not-for-profit child care—all of you don't need to be told this—is a very challenging industry. We were able to create an environment there that we maintained staff, which the parents loved and enjoyed. We were quite proud of that.

Throughout my business career, we always have, like I say, tied in fundraising and not-for-profit recognition because I've always been an advocate of that. I was brought up in a great family in Kitchener where volunteering your time was part of your lifestyle, and that's what was mentored through my parents.

My father, who has been passed away for quite some time, started a program at the University of Waterloo. He didn't feel that students should be left alone in dorm rooms over the holidays, so he encouraged the membership in his Kiwanis Club to take three people out of the dormitory at Christmas, regardless of faith or religion, and bring them into their home for Christmas Day. At the end of that program, there were 600 kids who were going out on Christmas Day into that environment, when normally they'd be cooped up in a room or eating a dormitory meal.

Throughout that whole tenure of my life when I was in my teens, I really learned what volunteering was all about, and facing challenges. Honestly, I've never looked back.

Now I have an opportunity in my life where I have time, and I'm interested in putting my time back into the community. That's why I'm here.

**The Chair (Mrs. Cristina Martins):** Thank you very much, Mr. Mace. We will now begin the questioning with the official opposition. Mr. Oosterhoff, please.

**Mr. Sam Oosterhoff:** Thank you so much for taking the time to come here today and for being willing to apply for this position. You have a very commendable record and a commendable history. A shout-out to Kitchener for training you well and a shout-out to Niagara for continuing in that tradition. We're very pleased that you're willing to continue in that tradition in Niagara.

You spoke about volunteering. One of the things I noticed in looking through some of the statistics about the Niagara area is that there are high levels of participation in "organized activities" of any of the five regions in the province. People are getting out and engaging, and I'm sure "organized activities" would also include service clubs and sports.

So hopefully people are getting engaged, but, as I'm sure the member for Niagara Falls will speak to, there is a lack among people my age of understanding of how to get involved in traditional service clubs and traditional organized activities, because they haven't grown up with the sort of focus that perhaps there was in the past.

I'm curious if you could speak a little bit to some of the six action areas of funding that the Ontario Trillium Foundation has specifically within Niagara and how you think we should improve on promising young people, inspired people, green people, connected people, active

people and prosperous people—but specifically with promising young people and inspired people.

0910

**Mr. Paul Mace:** I think the one thing—and it's not just with the Trillium Foundation—is a lack of awareness. I think that it's important to reach out to different organizations and to make them aware of the need in any community for involvement. You're right, I see that.

I spend a lot of time at Niagara College. It's a wonderful institution; however I think that there needs to be more time spent with people making them aware and educating them about some of the needs of these communities. It's no secret that in Niagara-on-the-Lake, with the physical activity and economic well-being in that whole Niagara region, the age is going up as far as my age group, but the amount of youth coming in is also quite important. But I think it's got to be a mandate where people develop programs to get out and educate and make people aware, so that you can get their involvement.

**Mr. Sam Oosterhoff:** Okay. I'd like to speak a little bit and ask you to explain your skills, specifically. You told us a bit about your history, which is always interesting, but what skills do you think you specifically bring? What experiences have you had that will be beneficial to working on the OTF, specifically in the Niagara region?

**Mr. Paul Mace:** Specifically to Niagara? Honestly, I've only been there, as I say, since 2013.

The skill set I bring is analytics. My whole life has been process-driven. I'm a firm advocate that process and evaluation are imperative in making decisions. What I would bring to the table is not just the experience I have, but also the fact that I think that everything has to be done on an even basis and follow a process, making sure that the monitoring and the measurement of that process is evaluated.

**Mr. Sam Oosterhoff:** Excellent. In 2011, the annual report of the Office of the Auditor General had an audit report of the Ontario Trillium Foundation. The auditor commented on the lack of formal public advertising to publicize the availability of OTF grants. I'm curious if you could speak about whether or not you think that has improved. We see a lot of advertising dollars now, more than ever in the past, whether that's the 25% hydro reduction or some of these issues. But I don't seem to have seen a lot of advertising regarding the OTF publicizing the availability.

Obviously, I'm sure every member here has had constituents come through who are looking for grants. We also do our best to help them with OTF applications. Could you speak to government advertising on OTF and whether or not you think there should be more, and whether or not perhaps we should be reallocating some of the dollars that are going elsewhere?

**Mr. Paul Mace:** If you're not looking for something, sometimes you don't actually recognize it. Honestly, I wasn't looking for a grant, so I probably wasn't in tune with something that may have been out there advertising for grants.

I think that traditional means of making people aware have to change. What I would suggest is that we need a monitoring system to see if the way they're being advertised is actually working. I'm probably the wrong person to ask, because I haven't been looking for a grant, but have I noticed anything? I have to say no.

I actually read that report from 2011. I saw that comment, and I saw some of the follow-up comments. I think we have to have new ways to create awareness for any program. It involves maybe using a little bit more of the media that's available today than it was maybe 15 or 20 years ago.

**Mr. Sam Oosterhoff:** More digital, perhaps, and less TV or whatever, right?

**Mr. Paul Mace:** Yes.

**Mr. Sam Oosterhoff:** One other thing: You mentioned the amount of people moving into the Niagara region. Niagara is growing by leaps and bounds, but we do have the second-highest density of retirees; after Victoria, BC, I believe we're the second highest in the country. What challenges does that bring to the Niagara region, and how can the OTF help with assisting those who are retired, especially with active living and sustainability?

**Mr. Paul Mace:** I think that the challenge it's going to bring, as well as the opportunities—I think that there will be opportunities for more volunteers because we have more time. I think that health in general has created a different awareness in the last 10 or 15 years. I certainly see it in my neighbourhoods.

But I think, also, what's going to happen is the focus on the grants is probably going to change and evolve into something different than it was four, five or 10 years ago, and that some of the requirements for funding will be in different areas than you may have seen in the past, just because the demographics have changed.

**Mr. Sam Oosterhoff:** Finally for me, where do you think is an area that you're going to need to improve on as you work with the OTF?

**Mr. Paul Mace:** Personally, myself?

**Mr. Sam Oosterhoff:** Since you're in a reflexive moment.

**Mr. Paul Mace:** Yes. I'm a good listener, but I think I can become a better listener and listen more in the community. My focus will change. When you're out at events—I attend a lot of events in Niagara-on-the-Lake and I think I'll start to listen a bit differently.

**Mr. Sam Oosterhoff:** Very good.

Randy, did you have any?

**Mr. Randy Pettapiece:** How much time do we have?

**The Chair (Mrs. Cristina Martins):** We've got about two and a half minutes. Mr. Pettapiece.

**Mr. Randy Pettapiece:** Most of us here, I think, have been involved in volunteer activities of some sort before we got down here to Queen's Park. I belong to a service club in a little town north of Stratford and I've belonged to it for over 30 years.

One of the things that our municipality did with the grant business in getting us familiar with the OTF was

they actually assigned one of their people—the municipality did—to advertise it throughout the community. They would come out to our service club meetings and explain it to us and help us fill out grant applications and whatever else. I think it has been a very good program.

Certainly, we, as a service club, weren't aware of the program when they first came out. With the paperwork end of it, we had difficulties with that type of thing, and they actually helped us get through all that. It's something that has been very successful in my municipality: that the municipal government actually took the initiative to get it out into the community.

I don't know whether that was a directive from OTF or whether that idea came from them. However, I think that's a program that could be quite successful in any community, if the municipality took the initiative and assigned somebody to help us with that.

I don't really have any questions. Your background is quite extensive, and I think you'll be a great member for this team.

**Mr. Paul Mace:** Thank you.

**The Chair (Mrs. Cristina Martins):** We'll now turn it over to Mr. Gates.

**Mr. Wayne Gates:** Good morning. How are you, Paul?

**Mr. Paul Mace:** Good morning. Very good.

**Mr. Wayne Gates:** I can say that I didn't know that you just moved to Niagara-on-the-Lake in 2013, but I was at an event on Friday night and you were there, and that's how we actually met. I can tell you that there were some seniors there. The music was extremely good—all by young people. The average age of that band probably would have been 21 to 23. They played great music, but they played all oldies. It was a good event.

I had the privilege of meeting you before today, and that's how I found out you were coming today.

Why did you move to Niagara-on-the-Lake?

**Mr. Paul Mace:** Oakville was a great community to raise our children. The pace: We wanted to slow down a bit and we were always fans of the Niagara region. It wasn't a hard call when the time came that we pack our bags in Oakville and move to Niagara-on-the-Lake.

**Mr. Wayne Gates:** So you've been there three years. What do you like so far?

**Mr. Paul Mace:** What do I like?

**Mr. Wayne Gates:** Yes.

**Mr. Paul Mace:** I like the fact that, within two minutes of my house, I'm out driving through vineyards and on backroads. In Niagara-on-the-Lake, or in Niagara generally, you can be as busy or as relaxed as you want to be. There are people I know who do very little and there are people I know who are very, very busy. My wife turned into a very, very busy person and loves it. It has an awful lot of opportunities. I do like that the fact that, when I go around the corner, I'm driving through vineyards and in the country.

**Mr. Wayne Gates:** Yes, it's quite beautiful down there.

To my colleague's question about the seniors: Yes, there are some seniors in Niagara-on-the-Lake, but

they're extremely active. They have lots of meetings and lots of things, and they're very active in the community on making the community better. I think that's good. That's just my few Niagara-on-the-Lake questions there.

Maybe you can tell us how your previous work experience will benefit the Niagara Grant Review Team.

**Mr. Paul Mace:** Like I said earlier, one of the things I'm good at is analytics. When I first got exposed to it in the sector of child care—it's a pretty tedious task when you're going through a \$2-million budget and have a 2% variable that you have to work with. That's not what we had in the profit sector. In the profit sector, you may have an 18% to 20% profit buffer, so that if it becomes 14%, that's fine.

0920

In any of the processes after that that I got involved in, whether it was through the hospitals or through business—I'm a very process-driven, analytical person, which I think is important in the review of these applications, that they have substance and credibility and are actually sustainable. I think that's only going to happen by persevering and following process and being fastidious about reviewing. I think that's really my strength.

**Mr. Wayne Gates:** What type of organizations should be a priority for receiving grants in Niagara?

**Mr. Paul Mace:** Well, that's probably tough. I've looked at the list that has been funded in the past. I think that we should be looking at organizations that are evolving in areas that have weaknesses. I'm not saying I know the answer to where the weaknesses are, but I certainly, I'm sure, would become familiar with that quite quickly. What I would suggest is that we look at areas that have weaknesses that may be a little bit out of the box, and in some cases that could be sustainable for years and years and years, that may not have been supported in the past.

**Mr. Wayne Gates:** Just a follow-up to that question: Do you believe there are certain areas or priorities to the Niagara region when identifying grant selections?

**Mr. Paul Mace:** Oh, yes.

**Mr. Wayne Gates:** What would they be?

**Mr. Paul Mace:** I think that we look at the changing demographics. We talked earlier about youth. We really have the best of both worlds there. We have an influx of young people, and we have an influx of older, retired people. So we've got all this wealth of knowledge—that we really need to cross-link the two of these and collaborate to benefit, that we have the new ideas with the old experience meshed in to get something that's sustainable.

**Mr. Wayne Gates:** I think a lot of people forget—because we do hear a lot, like Sam had said, about seniors coming to Niagara—there are a lot of families coming to Niagara. The whole makeup of Niagara is changing, whether it's in Niagara Falls, Niagara-on-the-Lake—even Welland, St. Catharines. A lot of young families are moving down to Niagara—some of that for affordability, because it has gotten so expensive in the GTA. I believe we have to reach out to them. I think that's important as well.

Do you believe the current Niagara Grant Review Team has done an adequate job of providing grants to organizations?

**Mr. Paul Mace:** I can't comment on that.

**Mr. Wayne Gates:** That's fair.

I said this to you, I think, at the event the other night: My staff has a very good working relationship with the employees there—talking about, "How can we do this better? Where can we try to mesh things?"

From that experience, we've actually gone out into the community and have talked to different service organizations, from our office, to make them aware that these grants are out there. They didn't know that. So that has helped quite a bit. Down in Niagara-on-the-Lake, we've gotten—I won't say a lot of money, because we need more, for the record—but we have been very successful with the grants in Niagara-on-the-Lake. You see that in our community, obviously.

I've got another question here, because I think this is an important one. Maybe you can help me on this one, because I'm a little concerned about this myself. What is your opinion on the OTF management and board's plan to drastically reduce Trillium's local presence by shrinking the number of grant areas from 16 to five? That's a concern for me.

**Mr. Paul Mace:** I did see that. If I was asked, I wouldn't support something like that, because I think you need to have feet on the ground in the community where you're approving the grants, because they're all different.

I'd look at—and forgive me for not knowing the exact name of the report—Looking Forward, I think, was the report that was done. It talked in generalities. It broke the province down into certain areas. We're in the west, but actually that geographic area is so large that it really doesn't reflect what's happening in Niagara, it doesn't reflect what's happening in Hamilton or whatever the regions are.

Like I said, if I was asked my opinion, I would say no, because I think for something like this you need feet on the ground in the communities. I certainly don't think you can comment about what's happening in northern Ontario if you live in St. Catharines, and I think vice versa you can't do that.

So my opinion would be no, I couldn't support something like that. I don't think it makes sense for what the grants are being used for.

**Mr. Wayne Gates:** I agree with you.

The last thing I'll say is thanks for volunteering your entire life. I was campaign chair for a couple of years in St. Catharines for the United Way.

I'm very pleased to say that I have a young daughter who's going to Brock, and she's out volunteering as well. Young people do care. I think you hit it right on the nail. If young people are encouraged to participate in long-term-care facilities wherever, they are there in a minute.

To your point, we've got to get to them. We've got to sit down with the colleges and universities and kind of direct them on where they can volunteer, and they'll be there in a minute. Our young people probably care not

only about seniors, but they also care about their community as well. I think it's just a matter of educating them on how important they are, to put those hours in.

**Mr. Paul Mace:** I agree.

**Mr. Wayne Gates:** Thanks.

**The Chair (Mrs. Cristina Martins):** Thank you very much, Mr. Gates, and thank you very much, Mr. Mace. That concludes—

*Interjection.*

**The Chair (Mrs. Cristina Martins):** Oh, sorry. We're now on to the government side. I apologize. Ms. Vernile.

**Ms. Daiene Vernile:** Saving the best for the last. Good morning, Paul.

**Mr. Wayne Gates:** She's forgetting about her own colleagues. What's going on here?

**The Chair (Mrs. Cristina Martins):** Five minutes and 25 seconds. Ms. Vernile.

**Ms. Daiene Vernile:** Thank you. As the MPP for Kitchener Centre, looking at your background here, I was delighted to see that you attended Grand River Collegiate in Kitchener, which is a fine institute. They just had their 50th anniversary last year. You also attended Wilfrid Laurier University, which is my alma mater.

I want to pick up on something you talked about, on the importance of volunteering. I was born and raised in Toronto, but I moved to KW to go to university and ended up staying there.

I was fortunate, while I was going to school, that I had a weekend part-time job at the local TV station, at CKCO. You can imagine the kinds of stories that you cover on the weekends, when I was working. It was usually non-profit events, fundraisers, walkathons and that kind of thing. I was immediately struck by the number of volunteers who would go to these events, and the spirit of volunteerism. It's a really caring community. I'm very pleased to hear that you have carried that kind of commitment throughout your lifetime.

I had the honour and the privilege just last week to hand out five Ontario Trillium Foundation grants to a number of organizations in our community. They were really happy to get this funding. Can you speak to the value that these grants have for these non-profit groups?

**Mr. Paul Mace:** I think that in a lot of cases, without these grants, a lot of these organizations may cease to exist. The one area that we always would welcome is that other organizations, when they see the support of the Trillium Foundation—you could piggyback and partner people who would always share in that growth.

I think that without some of these grants, either the importance of those organizations would disappear or they may not really manifest the mandates that they're trying to achieve, because they just couldn't get to their goal line without that funding.

**Ms. Daiene Vernile:** I want to thank you for your years of volunteering.

To my colleague who asked how we get the word out that these grants are available: Our MPP offices can certainly be a conduit for that information, on our web-

sites and on our social media. We have a job of letting the public know that these grants are available.

**Mr. Paul Mace:** I would agree.

**Ms. Daiene Vernile:** Thank you again for all your volunteer work. Good luck.

**Mr. Paul Mace:** You're quite welcome.

**The Chair (Mrs. Cristina Martins):** Thank you, Mr. Mace. And now that concludes—oh, we've got another question. I'm so sorry. Mr. Bradley.

**Mr. James J. Bradley:** I don't know if it's a question—but I think one of the great advantages that I've noted over the years is the independence of the grant review team. Whoever set up the grant review team, whichever government did that—and I don't know which one it was; I can't recall that—was wise, because when some of us are invited to participate in the presentation ceremonies or the celebration of the grant, one of the things that I note is that I have nothing to do with it. When they're getting the grant, I say, "Don't thank me for it," or, for that matter, the government—except that the government or the Legislature provides the overall funding. The great advantage that you will have is of being part of an independent review committee that is not subject to political pressure. That's going to be a great advantage because it allows you to assess each of the applications appropriately and then make a decision as a group.

I certainly am delighted that you are prepared to serve in this capacity. I think you will find it to be a good experience, partially because of the fact that it's not a political organization. In essence, it's a totally independent review team that makes its recommendations, and I can't remember those recommendations ever not being accepted.

Each one of us who are part of the Legislature has the opportunity to be there, at least to help the people celebrate, but not to pat ourselves on the back.

**Mr. Paul Mace:** Okay. Thank you.

**The Chair (Mrs. Cristina Martins):** Okay. So, are there any further questions or comments? Are we good? Okay.

**0930**

Now, Mr. Mace, that concludes the time allocated for this review. I'm going to ask you to step down.

**Mr. Paul Mace:** Okay. Thank you very much.

**The Chair (Mrs. Cristina Martins):** We'll consider the concurrences after the following interview.

#### MS. SUZANNE BÉLANGER-FONTAINE

Review of intended appointment, selected by third party: Ms. Suzanne Bélanger-Fontaine, intended appointee as member, Hamilton Niagara Haldimand Brant Local Health Integration Network.

**The Chair (Mrs. Cristina Martins):** Our next intended appointee today is Suzanne Bélanger-Fontaine, nominated as member, Hamilton Niagara Haldimand Brant Local Health Integration Network.

Please come forward. Take a seat at the table. Welcome. Thank you very much for being here today.

You've witnessed the procedure just before you. You may begin with a brief statement if you wish. The members of each party will then have 10 minutes to ask you questions. Any time used for your statement will be deducted from the government's time for questions. When that time begins, we'll begin with the third party.

With that, welcome once again, and you may begin. You have 10 minutes.

**Ms. Suzanne Bélanger-Fontaine:** Thank you, Madam Chair. Thank you, all of you members of Parliament. I'm a nervous wreck. Not very many citizens get to have that much attention from a whole bunch of members of Parliament, so it's very exciting. I was up at the crack of dawn, wondering how I was going to dazzle you with my skill set.

You've all seen my resumé. I have over 30 years of work experience, all in government, on this side of the table but as a public servant. I have university degrees.

But what I wanted to do this morning is I wanted you to get to know me. I've already listened to some of your comments. I have a lot in common with you, but what we all have in common is that at one point or another, we're all going to have to go through the health system, whether you're being born or whether you're at the end of life. This is really, I think, what I wanted to stress about who I am.

I was born in Quebec City. I attended university in Quebec at Laval and then at Université du Québec in Montreal. Then one of my teachers asked me to apply for a scholarship to learn sciences in English. It was a woman in science—you can pretty much guess the time frame of that. I chose Brock University. I heard comments from the previous panellist about the beauty of Niagara. I don't think there is anything else I can say about that. It is absolutely amazing, and it's going on to almost 40 years ago for me.

I've always been a volunteer. It was part of my family fabric, just like my predecessor, I think. When I got to St. Catharines, I joined the francophone community centre. At one of those general meetings, nobody was there, I think. Anyway, I ended up being president. You know, it happens.

**Mr. James J. Bradley:** That's what happens.

**Ms. Suzanne Bélanger-Fontaine:** That's what happens.

I was also editor of the francophone newspaper in the Niagara region for several years. I remember doing an article, actually, on Mr. Bradley.

**Mr. Wayne Gates:** Everybody has done an article on Bradley.

**Mr. Randy Pettapiece:** I haven't.

**Ms. Suzanne Bélanger-Fontaine:** Well, I don't think he has read it, but—

**Mr. James J. Bradley:** Good or bad?

**Ms. Suzanne Bélanger-Fontaine:** It was good. You were our member of Parliament. I knew where the grants were coming—anyway, that's another story.

I also worked in wineries. At the time, I met a Franco-Ontarian from Welland. We have a saying in French: "Who takes husband, takes country." That's how I identify: as a Hamilton-Niagara girl, because it has been over 30 years, and we have two grown children. Anyway, you get the picture.

I started working locally at family and children's services at Niagara College, and then I joined the federal government. I worked closely with the First Nations in the territory of this particular LHIN—the First Nations of the Grand River.

After that, I joined the government of Ontario as a senior environmental officer. I was there for a little over 10 years, and I was covering Hamilton, Brantford, Haldimand, Norfolk—not Niagara, but my heart is still there.

In 2001, I joined the federal government. I worked for National Defence and Indian and Northern Affairs. As you've seen in my resumé, my last posting, as I'll call it, was with the Office of the Commissioner of Official Languages, where I was the representative for the province of Ontario.

During that time, we did deviate from Niagara. We spent seven years in Ottawa and three years in the Yukon. There was never any doubt that we would come back to this beautiful region.

To give you the context of why I applied—because some of you must be wondering what happened. My husband, Gilles, last year, got sick. After losing both in-laws within a year, I finally found out what the health system is all about—as a patient, of course, but also as a caregiver. When my husband got better—thank you, health system—I decided, after retiring in 2016, that retirement wasn't for me. So in 2016, after my husband got better, I joined the Collège Boréal, which is one of the two francophone colleges, as you know. It covers everything except the Ottawa region. I'm their director of immigration programs and services for the province.

Last year, I attended a South West LHIN event, and I got to listen to George Smitherman and Andrew Coyne talk at great length about the health system.

I read two books—I actually read more than two books last year, but I'm going to—one is *Being Mortal*. I think some of you might know Atul Gawande. The other one is *Better Now* by Dr. Danielle Martin.

At the same time, Patients First was also on all of our minds, as the government was asking hard questions. Close to half of the Ontario government spending—I don't need to tell you that—is spent on health. We have an aging population. We need to develop compassionate communities, services, home services, hubs.

Sometimes I got worried, throughout this process, that our universal system could become something else. An example of that is the Code Red in Hamilton and the overuse of emergency because there's not enough access to primary care physicians—and also the socio-economic determinants of health, which are things that are making this puzzle that you legislators have to figure out. I am so glad this isn't my job; it's your job.

So I thought, I'm close to retirement; I want to continue to contribute. I understand government and how public policies are being implemented. I'm a public servant; I'm very proud of this. I live in the third-largest LHIN, which has amazing access and innovation and a whole bunch of new health care professionals who are being trained to work as part of teams. I have met the board of the LHIN and the CEO. They're very caring, intelligent and passionate. And, as a very selfish gesture, I would like to be part of the way forward.

Of course, somebody asked me, am I here because I'm a francophone? Well, that's part of who I am, so you might be interested in that part as well. The francophonie in this particular LHIN is aging. A lot of francophones have married anglophones or—do we say “allophones”?

**M. Shafiq Qaadri:** Oui.

**Ms. Suzanne Bélanger-Fontaine:** Thank you. Of course, the territory of this particular LHIN, as we see around this table, is not homogeneous. It has small communities and large communities and farming communities. It's very, very complex.

As a francophone, 25 years ago—we just celebrated that. We also had our first francophone community health centre, which has a location in Hamilton/Niagara—one in Hamilton, one in Niagara.

When you're bilingual, it's such a blessing because you can speak to 93% of Canadians. It's an opportunity, but it's also something that is scary. Three years ago—I like to say this just for the shock value—I had brain tumour surgery. It's a great topic of conversation at parties. What I realized at that point is that as we're aging some of us will have cognitive issues, will be faced with not necessarily remembering our second or our third language. The French Language Services Act is an opportunity to develop processes, to develop new models of service delivery—I'm almost done, I know. I get excited.

**The Chair (Mrs. Cristina Martins):** You have just over a minute.

**Ms. Suzanne Bélanger-Fontaine:** Yes. It's an opportunity because, once you've developed it for one particular, let's say, language, you can transfer. Those are all transferable skills or transferable models that you can have that could be helpful.

0940

In closing, because I have your undivided attention, I wanted to say about Patients First that, to me, it's not in the political sense, whoever developed Patients First; to me, it's about access. It's about us as a community, us as citizens of this beautiful province. Behind every patient, there's always a family and a community. As a member of the board of the LHIN, I would like to be part of the next step of how you people, the elected officials, see it.

Thank you for giving me this opportunity. I was so nervous. Thank you.

**The Chair (Mrs. Cristina Martins):** Thank you very much, Ms. Bélanger-Fontaine. No need to be nervous. We are now going to start the questions with Mr. Gates.

**Mr. Wayne Gates:** Well, I'll make you feel better: I'm nervous every Tuesday. I get to meet with these guys every Tuesday; I'm nervous before I come every day. Welcome.

As you're aware, or you should be, there are major issues with health care all throughout the province—you touched a little bit about that—including the Niagara region. I'm curious to hear what you believe are some of the issues or challenges that are directly affecting health care in Niagara, particularly surrounding wait times and delivery.

**Ms. Suzanne Bélanger-Fontaine:** I'm sorry. I need to make notes.

**Mr. Wayne Gates:** That's all right.

**Ms. Suzanne Bélanger-Fontaine:** I think what we hear a lot about, and what I think the new way of looking at the world is, is around access to primary care. I won't use a Niagara Falls example; I'll use a Hamilton example. When you have so many people who are going to emergency because they don't have access to primary care, because there are not enough primary care physicians in their area or maybe they are not aware of it, we need to do better about access.

Wait time—it's interesting. There was an article, I think, about two weeks ago about the wait time in the emergency rooms, and not just the wait time, but the ambulances that were sort of lined up in the parking lot waiting to unload. Can we do better? I think we're going to need to get the right data for that—but can we do better at streaming out? Why are these people in the emergency queue when maybe they could be somewhere else? I think this might be an accountable way of looking at: Can we get the right data? Can we help these people get the right care?

It might not be in emergency. It doesn't need to be in a big brick-and-mortar environment. Can we sustain the kind of delivery model that we have now?

The wait time—you're a frontier guy in Niagara Falls. I have friends who have taken their children for MRIs and X-rays in Buffalo. I'm always curious as to why. They always say, “Well, I can't wait for that.” So this is something that we need to have better data for, that we need to be able to address.

**Mr. Wayne Gates:** Okay. I'll just add to your Patients First comment, and then I'll ask you about MRIs; it's in my questions.

My theory around spending half our tax dollars on health care: It's how we divide the pie. The problem that I see with the pie, quite frankly, is that a big chunk of the pie goes to the LHINs, and then, although it's coming under the LHINs, it's still going to the CCAC next, and then the next is a private company called CarePartners. We've lost four or five pieces out of that pie before one penny goes to front-line workers. That's the issue in the province of Ontario. That, in my opinion, is what has to be corrected.

To your question on MRIs—that's my next question. You're sure you didn't read these before you came?

**Ms. Suzanne Bélanger-Fontaine:** No, I didn't.

**Mr. Wayne Gates:** Okay.

Previously, I put forward a motion in the House asking the government to address the very high wait times for MRIs in Niagara. That motion passed. It was supported, by the way, by all three parties, which doesn't happen a lot here, but it was, and it was greatly appreciated. The government did grant increased funding to the LHIN for reduction in the wait times for the MRIs. What they did is they built a new hospital. They had one machine, but they have a facility that can have two machines and we would stay within the provincial average. Unfortunately, they spent a billion dollars on a hospital but only put in one machine. To your point, that's why people end up going to Buffalo, which makes no sense. Now, our ultimate goal is to seek financial support for the purchase of an additional MRI machine in Niagara.

How do you feel the LHIN can assist in achieving this goal, and do you believe the LHIN has a role to play at all in addressing higher-than-average MRI wait times in Niagara?

**Ms. Suzanne Bélanger-Fontaine:** This is very specific. I think any wait time has to be looked at. I'd like to say yes, just because I would like you to really like me, but I think it's a very complex issue. What are people waiting for? What is their place in the queue? How urgent is it? Those are decisions that are clinical decisions.

As far as helping, I think MRIs and—it's the way people now look at the world: "This is what I need in order to address my health issue." So, of course, the more, the better, but I don't know how much this costs and how reasonable it is. So I don't have an answer.

**Mr. Wayne Gates:** The reasonable part is it would have been included when they built the new hospital. That would have made a lot of sense.

**Ms. Suzanne Bélanger-Fontaine:** Well, that's accountability.

**Mr. Wayne Gates:** But in fairness to the LHIN, I met with them on Thursday in my office and I raised this issue with them. When we were able to get the motion passed and more resources were given, our wait time came down to almost the provincial average of 28 days. The problem is, it stopped, and that's why I met with them again. Now the average is going back up to over 100 days. That makes no sense, in the way I think.

When you ask, "How important is the MRI?"—if a doctor thinks I need an MRI, it's important. Now, it might not be life-threatening, but if I can't get out of bed because my shoulder is so bad and they don't know what it is—that MRI is very, very important to that person who is suffering every day.

Anyway, I'll talk on that, but I think I want to get into another one before my time runs out.

Another major issue we face in health care in Niagara is the area of mental health, particularly children's mental health. This is really kind of new, I think, to a lot of people, and it's really surprising, I think, to some parents, quite frankly, that this has taken hold in our society. Quite frankly, I think a lot of the parents, including

myself, didn't realize just what some of our children are going through, whether that's because of marriage split-ups, pressure in school, or whatever the case may be. What do you believe are some of the major challenges in mental health service in Niagara, and how do you think we can improve them?

**Ms. Suzanne Bélanger-Fontaine:** As the mother of a young man who has suffered some serious mental health issues over the course of his entire life, I think the identification and removing the stigma are two of the important things to allow the discussion to move forward. That means that it goes from daycare to school to family physicians, and the ability for them to move to service delivery to accompany not just the child, but also the parents and the community.

**Mr. Wayne Gates:** I'll follow up with that, because I think this is important too. This is a stat that jumps out at a lot of people: One in five are suffering from mental health issues today—not just young people, but one in five. Yet when you take a look at the funding in millions of dollars, only \$76 million goes to mental health. Do you believe that's enough money?

**Ms. Suzanne Bélanger-Fontaine:** I would say no. Just—

**Mr. Wayne Gates:** I'm saying the same thing as you, but I just thought I'd ask. On these committees—just so you don't have to be nervous—I don't think we've ever voted anybody down. Some of that comes from the fact that the Liberals have a majority government and they have the most votes, so no matter what we do here, we're going to lose.

**Ms. Suzanne Bélanger-Fontaine:** No, you're not.

*Interjections.*

**Mr. Wayne Gates:** But at the end of the day, what's important to me, quite frankly, is to make you more aware of that.

**Ms. Suzanne Bélanger-Fontaine:** Absolutely. I'm taking notes, sir.

**Mr. Wayne Gates:** I know that you're a francophone, and I know that you know about the challenges that are in Welland, but also what's equally important is that you've had some dealings with First Nations. There is nothing worse than what's going on in our First Nations community today, with young people committing suicide.

So I say this for a couple of reasons. One is, obviously, I've got to ask some questions. But when I look at mental health, I really think that is the crisis that is hitting us in the face very, very quickly and right across society, whether it be to your point—you've had a family member who has suffered with mental health through their entire life—or whether it's through children, whether it's our First Nations that are suffering and committing suicide. In Welland, we've had some young kids commit suicide as well.

**Ms. Suzanne Bélanger-Fontaine:** I know.

**Mr. Wayne Gates:** I think mental health is really something that we've got to pay a little more attention to. At least by raising it in front of you, I'm hoping that you

maybe will take a serious look at it with your expertise that you already have.

**Ms. Suzanne Bélanger-Fontaine:** I appreciate that, Mr. Gates.

**Mr. Wayne Gates:** That was one of the reasons why I wanted to say that.

Then, on the ambulance—I know I don't have a lot of time.

**The Chair (Mrs. Cristina Martins):** You've got a minute.

**Mr. Wayne Gates:** I've got a minute, so I'll make a statement on this: You're right, on the ambulance. It's not just in Hamilton; it's probably right across the province. But I see it because I represent Niagara. We have a lot of code zeros. Hamilton has a lot of code zeros. The code zeros are going up. What that means is the ambulance is at the hospital and can't perform its duties into the community—which, if you're having a heart attack or something like that, that's very, very concerning.

**0950**

I will say that I'm looking forward to this Friday. I'm going out on a ride with EMS. I'm going to spend the entire day running with EMS and getting a better understanding of what they're going through every day and seeing what's going on in our streets in Niagara.

I appreciate you coming today. I know I gave you a few stats here that you might not be familiar with, but I know your expertise around some of those issues, and I know you'll do a good job on behalf of us who are, so thank you.

**Ms. Suzanne Bélanger-Fontaine:** Thank you, sir.

**The Chair (Mrs. Cristina Martins):** Now we'll turn it to the government side, which has 22 seconds.

**M. Shafiq Qaadri:** Merci beaucoup, madame Bélanger-Fontaine. Nous avons lu votre formation. Votre engagement avec la communauté, en fait, c'est extraordinaire. Merci pour votre présence.

**M<sup>me</sup> Suzanne Bélanger-Fontaine:** Merci, monsieur Qaadri.

**La Présidente (M<sup>me</sup> Cristina Martins):** Merci, monsieur Qaadri.

We're now going to turn it over to Mr. Pettapiece.

**Mr. Randy Pettapiece:** Welcome.

**Ms. Suzanne Bélanger-Fontaine:** Thank you.

**Mr. Randy Pettapiece:** I'm sure your enthusiasm is going to bode well with this new position, and certainly your experience in your past life.

**Ms. Suzanne Bélanger-Fontaine:** Thank you.

**Mr. Randy Pettapiece:** There's a paragraph that I was reading here this morning which was really interesting. It has to do with the attraction and retention of health care professionals in minority-language communities. Can you tell me a little bit more about your work in that?

**Ms. Suzanne Bélanger-Fontaine:** Last year, I actually did two small consulting projects in my spare time—as my family would tell you, there is no such thing as spare time. One of them was actually on how to better support—it was francophones, but like I said, those are

all transferable skills—organizations in acquiring and keeping this pool of workers.

There is a really good document that was produced by the Francophone Health Network. It was validated across the country. It is a very, very difficult subject because often the minority-language workers end up being more language workers than professionals. That balance is really hard to maintain. I think a lot of administrators and HR professionals are sometimes scared to go that route because they think that people will be pigeonholed into that language box.

As a worker, I was very fortunate; I didn't have to work exclusively in bilingual environments. Sometimes it is better not to work in that second language because you get more opportunities. It's how do you balance that?

But I think part of our role as not just francophones but as citizens is to explain that this isn't a limiting factor. On the contrary, it's opening a door. How do you change the culture of any organization to accept that sometimes there is a different way to do the attraction and retention? In the case of francophones, it is a major, major issue.

Recently, two doctors here in Toronto at the francophone health centre left at the same time, and left the organization just like that. It was the end of their term. I'm not blaming the doctors. What I'm saying is, how do you keep them and how do you support them in maintaining not just language skills, but maintaining their skill set. So what is more important?

**Mr. Randy Pettapiece:** Where did they go? Do you know?

**Ms. Suzanne Bélanger-Fontaine:** They went to a FHO, a family health organization—I'm learning all these new acronyms. They decided to get together a group of them and start their own practice.

**Mr. Randy Pettapiece:** Did they stay in the province or in the country?

**Ms. Suzanne Bélanger-Fontaine:** They stayed in the province. Still, it's difficult when people have not only this great skill set as professionals, whether they're nurses or midwives or doctors, but they also have to support the demand of the language requirements.

**Mr. Randy Pettapiece:** I was hoping that you had a really great success story because all of communities—it doesn't matter whether you're from Niagara or from where I'm from in midwestern Ontario, we do have issues with the numbers of doctors. In fact, the community I live in is going to be two or three doctors short next year because of retirements and that type of thing. That's a lot of people who are going to be without service.

One of the things that I heard from a meeting I had with our doctors a couple of weeks ago—and I don't know the percentages. I think you hear these percentages and they go up and down, no matter who you're talking about. That's why I asked you where these doctors go. A lot of the graduating students in universities are heading south, and that's really too bad. I mean, they're educated

here—they're Canadian kids, most of them—and now they're looking that way.

**Ms. Suzanne Bélanger-Fontaine:** I know.

**Mr. Randy Pettapiece:** I just wondered if maybe there was a migration going to the States.

I'm going to ask you just one more short question, and then I'll hand it over to my colleague Mr. Oosterhoff.

It says: "In the past year, I consulted part-time"—please forgive me if I mess this up—"for the Réseau franco-santé du Sud de l'Ontario on the health needs for francophone seniors." Is there a difference between francophone seniors and anglophone seniors?

**Ms. Suzanne Bélanger-Fontaine:** I think I alluded to the cognitive aspect as you're getting older, and my own personal experience with having to juggle to relearn basic things like cursive letters.

Anyway, I like to look at different models, and I'm always curious about how we can do better. Two examples, quickly: North York hospital has a multi-language welcoming technology centre, which is absolutely amazing, because no matter what your language is, you might be able to communicate through technology, which I think is really good. Also, in Scarborough, the Bendale Acres has what I call a pod—it could be a hub; I don't know what language to use—where francophone seniors can go.

There are models out there that can be good for not just francophone seniors but other seniors. I think my experience has been that at some point in our lifetime, it will happen. It could happen younger; it could happen later. But somewhere in there, we need to support the family members. We need to support the patients to be able to express what it is that is wrong or not well with them.

What I think I learned the most in this particular exercise, because I did all of southern Ontario with this, is how this might be a model worth developing in not just French-language services. It can be developed in other types of services.

**Mr. Sam Oosterhoff:** Suzanne, thank you so much for coming and being willing to speak with us and get all our questions. I know some of the members can be pretty difficult.

I did have questions about something that I think is very important and that we haven't talked about as much here in Ontario—

*Interjection.*

**Mr. Sam Oosterhoff:** It's okay. I won't hold it against you.

We haven't talked about it as much in Ontario as they have out west. It's a huge issue in the west, but it is also a big issue in Niagara. That's the opioid crisis, which is something that we all agree we need to see more action on. From our party, we've been putting forward some ideas on that as well.

I'd like you to speak to the Niagara context, or the Hamilton Niagara LHIN, that context. What do you think are some of the driving factors of the opioid crisis in our

neck of the woods, and what can we do to address that? What can the LHIN do to help address that?

**Ms. Suzanne Bélanger-Fontaine:** Some of it is not under the LHIN's purview, the whole public health, but I think educating the population is part of what the LHIN has to continue to do.

I like this expression: socio-economic determinants of health. I think that it's an issue where some of it is a social structure, and some of it is economics. While our overall picture is good, I think there are sub-regions within the LHIN that are more affected by unemployment. The education level—it's going to sound snarky; I don't mean it this way—not everybody is in Niagara-on-the-Lake in the LHIN. There are some social issues, economic issues.

There are going to be some decisions to make, and those are going to be your decisions. Are we going to have, at some point, some safe injection sites? There was something on the CBC this morning about that. Are we going to continue to have codeine pills being distributed in pharmacies without prescriptions? Those are the kinds of things that I'm not sure are the LHINs' purview, but under the guidance of the elected officials this could become the LHINs' purview in terms of public health as a discussion point for the opioid crisis.

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**Mr. Sam Oosterhoff:** Yes, and I think it's definitely a very important discussion to have.

**The Chair (Mrs. Cristina Martins):** You have 45 seconds.

**Mr. Sam Oosterhoff:** Oh, okay. Real quick, on the record: It says you're from Hamilton?

**Ms. Suzanne Bélanger-Fontaine:** Yes.

**Mr. Sam Oosterhoff:** Okay. Which area in Hamilton?

**Ms. Suzanne Bélanger-Fontaine:** We live in Ancaster.

**Mr. Sam Oosterhoff:** Oh, beautiful, beautiful. I have family there.

Question: the West Lincoln Memorial Hospital—do you think it should be redeveloped quickly?

**Ms. Suzanne Bélanger-Fontaine:** I'm not going there.

**Mr. Sam Oosterhoff:** You're not going there?

**Ms. Suzanne Bélanger-Fontaine:** I'm so sorry. I just—

**Mr. Sam Oosterhoff:** It's been 60, 70 years. We keep pushing for it.

**Ms. Suzanne Bélanger-Fontaine:** My daughter had foot surgery there when she was younger, but anyway.

**Mr. Sam Oosterhoff:** Really? Well, it's a great area. The HHS does great work.

Thank you so much for being willing to be nominated to the board.

**The Chair (Mrs. Cristina Martins):** Thank you very much, Mr. Oosterhoff, and thank you very much, Ms. Bélanger-Fontaine. See? It was not so bad. That concludes the time allotted for this interview. Thank you very much. You may step down.

We will now consider the concurrence for Mr. Paul Mace, nominated as member, Niagara Grant Review Team. Would someone please move the concurrence? Mr. Qaadri, please.

**Mr. Shafiq Qaadri:** Thank you, Madam Chair. I move concurrence in the intended appointment of Paul Mace, nominated as member, Niagara Grant Review Team.

**The Chair (Mrs. Cristina Martins):** Any discussion? All in favour? Opposed? The motion is carried.

We will now consider the concurrence for Suzanne Bélanger-Fontaine, nominated as member, Hamilton Niagara Haldimand Brant Local Health Integration Network. Would someone please move the concurrence? Mr. Qaadri.

**Mr. Shafiq Qaadri:** Thank you, Madam Chair. I move concurrence in the intended appointment of Suzanne Bélanger-Fontaine, nominated as member, Hamilton Niagara Haldimand Brant Local Health Integration Network.

**The Chair (Mrs. Cristina Martins):** Any discussion? Mr. Bradley.

**Mr. James J. Bradley:** Yes, I found the answers intriguing. It was suitable, I think, that the proposed appointee was cautious in responding, because I remember having somewhat of a prolonged meeting with a former health minister from the Bill Davis era—he had probably been the longest-serving health minister—who said to me at the time, “There will never be enough money for health care.” That has proven to be true over the years, so your caution there is twofold.

The second thing I do now when I meet people who are demanding more extensive services, additional services, is that I ask them the question, “Are you prepared to campaign for a tax increase to pay for what you want?” Usually it’s met with silence or “Take it from somewhere else.” So the challenge you will have, without a doubt, with whatever allocation—as Mr. Gates has mentioned, the percentage of funding that goes into health is at the expense, by the way, of other endeavours, and necessary, nevertheless—is that you will always have to make those difficult decisions as to where things will go.

The last thing I will say is sometimes my good friend from Niagara Falls can publicly say that he campaigned

on behalf of additional funding, part of which would go to MRIs. I can tell you, I can’t do it publicly but I do it privately, and it has an impact as well. So we’re all on the same side there.

I wish you well, because the demands will be great. For every government, the demands have been greater than what they would be prepared to give in terms of funding for health care without a significant tax increase. That makes it even more challenging than it is when you simply can say, “I’ll just pile more money in there,” which is a very tempting thing to do, because the needs are very great. But when I ask that question, the odd person will say, “Yes, I’m prepared to do it.”

I don’t just ask, “Are you in favour of it?” I say, “Are you prepared to campaign for a tax increase for it?”, because I can’t think of parties getting elected campaigning for tax increases. It rarely happens. But all of us as individual advocates advocate for more money, and in a parochial sense, each one of us who are from Niagara will be there to advocate on behalf of Niagara.

**The Chair (Mrs. Cristina Martins):** Any further discussion? All in favour? Opposed? The motion is carried. Congratulations, Ms. Bélanger-Fontaine.

We’ve got a couple of deadline extensions here. There are two intended appointees whose deadlines expire this Sunday, September 17.

Jonathan Batty, nominated as member and associate chair of the Licence Appeal Tribunal (Safety, Licensing Appeals and Standards Tribunals Ontario), and as member of the Animal Care Review Board, Fire Safety Commission, Ontario Civilian Police Commission and Ontario Parole Board (Safety, Licensing Appeals and Standards Tribunals Ontario): Do we have unanimous agreement to extend the deadline to consider the intended appointment of Jonathan Batty from September 17, 2017, to October 17, 2017? Okay, perfect.

The next intended appointee that we need to extend the deadline for is Mr. Phil Verster, nominated as member, Metrolinx. Do we have unanimous consent to extend the deadline of Mr. Phil Verster from September 17, 2017, to October 17, 2017? Unanimous consent? All in favour? Perfect. Excellent.

With that, we conclude today’s meeting. Thank you very much.

*The committee adjourned at 1007.*

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